

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FCPTO-875)

SERIAL NO.

10/517610

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		2				
4	1					
5		1				
6		2				
7		(1)				
8		(1)				
9		(1)				
10						
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50						
TOTAL IND.	2	↓		↓		↓
TOTAL DEP.	5	←		←		←
TOTAL CLAIMS	11	⊞		⊞		⊞

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS		⊞		⊞		⊞